Homeless Alliance of Rutherford County

Membership Application

HARC membership is open to interested individuals and relevant organizations, including – but not limited to – nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, colleges and universities, affordable housing developers, law enforcement and organizations that serve veterans. Members must participate on at least one Working Group of the Alliance.

Please	e check:				
□ Orga	anization/Business/Agency	Formerly Homeless Indi	ividual		
Organ	ization/Business/ Agency N	Name or Name	of Individual		
Addres	SS				
City			State		Zip
Phone	<u> </u>	Fax	 E-mail		
Who is	rganization/Business/Ages authorized to vote in gene		Only p meetings on your behalf?		
Does y Is you	your agency have 501(c)3 : r agency faith based? □ Ye nment Entity □ Yes □ No		□ No □ Pending		
	pulation(s) you specifica				
□Ре	Specific Population/All I rsons Re-entering Socie ner (Please specify)	•	□ Domestic Violence□ Substance Abusers	□ Youth □ Mentally ill	□ HIV/Aids □ Veterans
		g Group you w	vould like to serve: (You ma	ay choose more than	one.)
	Service Delivery - prom Time Count	note cooperatio	n between the homeless pr	oviders/assess needs/c	do the Annual Point in
	Membership and Advocacy - recruit members /advocate on homeless issues/nominate members for the Executive Committee				
	Planning - work on goals and objectives/10 year plan/Continuum of Care Action Plan/gaps analysis				
	Project Review and Ranking - rank and review new and renewal projects project/monitor projects/certify membership status for ESG projects				
	Consumer Council - co Executive Committee	omposed of ho	meless or formerly homeles	ss individuals/make red	commendations to the
	For Continuum	of Care use on	nly: Date	e received by the Memb	pership Working Group